RESOLUTION # 83-2017

Resolution offered by the Health and Aging Committee;

Resolved by the Board of Supervisors of Oneida County, Wisconsin:

WHEREAS, the Wisconsin Department of Health Services (DHS) states the mission of the Aging and Disability Resource Centers (ADRC) is, "To provide older adults and people with physical or developmental/intellectual disabilities the resources needed to live with dignity and security, and achieve maximum independence and quality of life. The goal of the ADRC is to empower individuals to make informed choices and to streamline access to the right and appropriate services and supports; and

WHEREAS, since January 2012 (Resolution #40-2011) the Oneida County Department on Aging has been a partner in the ADRC of the Northwoods (ADRC-NW) and successfully managing the employees and services of the ADRC-NW Rhinelander office and meeting the DHS Scope of Services contract requirements; and

WHEREAS, the State of Wisconsin is committed to the integration of county aging units and ADRCs to enhance coordination and reduce duplication of effort in service delivery; and

WHEREAS, as authorized by Resolution #49-2017, the Oneida County Department on Aging submitted to DHS the *Notice of Intent to Submit an Application* to operate an ADRC and also notified the ADRC of the Northwoods of Oneida County's intent to withdraw as a partner of the Long Term Care District and seek an early release from the contractual obligations of the regional partnership; and

WHEREAS, as an integrated aging and ADRC unit, the ADRC of Oneida County shall comply with the duties set forth in Wis.Stat. 46.283(4) and subject to the requirements contained in Chapter DHS 10 of the Wisconsin Administrative Code as well as requirements for county aging units under the Older Americans Act and Wisconsin Elders Act; and

WHEREAS, the application demonstrates the ability to meet all ADRC and governing board, with adequate funding available and no additional county tax levy required.

NOW, THEREFORE, BE IT RESOLVED by the Oneida County Board of Supervisors in session this 17th day of October, 2017, does hereby support and authorize the Oneida County Department on Aging to submit the application to the Wisconsin Department of Health Services for the operation of the Aging and Disability Resource Center of Oneida County.

Vote Required: Majority = ______ 3⁄4 Majority = ______ 3⁄4 Majority = _____

Resolution - #83-2017

		ر 	× ()	Ben Kebusiak
			X	Brighid Billing
				TAGS
AND ASSESSED.))	19	TOTALS
			×	Hintz
			×	Kelly
			×	Freudenberg
	×			Krolczyk
			×	Jensen
			×	Metropulos
			×	Cushing
		X		Timmons
			≺-	Sorensen
			X	Zunker
			X	VanRaalte
			Y	Paszak
			X	Mott
			X	Pederson
			×	Winkler
			×	Oettinger
			X	Pence
			×	Fried
			¥	Holewinski
			×	lves
			76.	Young
ABSTAIN	ABS	NAY	AYE	Supervisors

Resolution # 83-2017: Offered by the Supervisors of the Health and Aging Committee to support and authorize the Oneida County Department on Aging to submit the application to the Wisconsin Department of Health Services for the operation of the Aging and Disability Resource Center of Oneida County.

5,000,5			() () () () () () () () () ()			6. 3	
				ASSESSMENT MANAGEMENT OF THE PROPERTY OF THE P			
		77					

Approved by the Commis	sion on Aging (Committee this 10 th day of October 2017.
Consent Agenda Item:	YES>	X_NO
Offered and passage mov	ed by:	Supervisor Supervisor Supervisor Supervisor Supervisor Supervisor
19 Ayes Nays		Mayne Supervisor Supervisor Paner Supervisor
Absent Abstain Adopted	e e	
A Adonted		

PART II: EXECUTIVE SUMMARY

The ADRC of Oneida County (ADRC) will serve the geographic area of Oneida County, Wisconsin. Oneida County is a rural county with 1,236 square miles and a total population of 35,754. Of this population 11,102 residents (31%) are age 60 or older and 2,295 (.06 %) are ages 18-64 with a disability. The county's older residents are increasing at a higher rate than the state average due to the popularity of retirement residences on lake property in this popular tourist region.

The largest city, Rhinelander, has 7,589 residents and is also the county seat. The actual population of the "Greater Rhinelander Area" is much higher due to the numerous lake communities that surround the city. The next largest populated area is on the northern border of the county and includes the Towns of Woodruff, Minocqua and Hazelhurst (also referred to as the "Lakeland" area).

Since 2012, Oneida County has been a partner in the ADRC of the Northwoods (ADRC-NW) with Forest, Taylor and Vilas Counties and Forest County Potawatomi, Forest County Sokaogon Chippewa, and Vilas County Lac du Flambeau Tribes. The only governance structure agreeable to all partners was a Long-Term Care District. In early 2017, the Sokaogon Chippewa asked to withdraw as a partner and offer ADRC services through an Aging and Disability Resource Center Specialist (ADRS) option.

The Oneida County Department on Aging (OCDOA) has successfully managed the ADRC of the Northwoods Rhinelander Satellite office for over five (5) years. The OCDOA Assistant Director is the direct supervisor for the three (3) ADRC Specialists and the Elder Benefit Specialist (EBS). The Disability Benefit Specialist (DBS) works cooperatively with the ADRC-NW Rhinelander Satellite team but is employed by the ADRC-NW, and rents an office location within the Department on Aging facility.

The OCDOA has been following the statewide trend to integrate the county aging unit with ADRC services. The Oneida County Commission on Aging (OCDOA) has received regular updates on this issue especially since the state Bureau of Aging and Disability Resources (BADR)

requested the Aging and Disability Professionals Association of Wisconsin (ADPAW) study the issue and issue their report on integration in June 2016.

In 2017, the OCDOA created a subcommittee to closely examine the pros and cons of an integrated aging unit and ADRC and make a recommendation in the best interest of Oneida County citizens. The subcommittee surveyed seven (7) integrated ADRCs (representing 16 counties) with a variety of questions. The responses overwhelmingly supported the integrated model. The subcommittee supported an integrated model but were not certain if there was adequate funding.

The next step included evaluating if there were sufficient resources for Oneida County to operate a stand-alone one-county ADRC. After receiving the dollar amounts for Oneida County's ADRC allocation from BADR, in combination with estimated time reporting match (40%- 2016 Oneida County ADRC Specialist's average), a budget was drafted. The draft budget confirmed there was adequate resources for Oneida County to achieve the goal of full integration as a stand-alone county.

The OCDOA approved a resolution that was forwarded to Oneida County Board of Supervisors and approved on August 15, 2017 to allow the OCDOA to submit to BADR the *Notice of Intent to Apply to Operate an ADRC* and notify the ADRC-NW of our intent to withdraw as a partner.

Once in operation, the Aging & Disability Resource Center of Oneida County (ADRC-OC) primary office location will be in Rhinelander. A secondary location is anticipated in the Lakeland area within the first year with revolving staff.

A critical part of the transition from being a partner in a multi-county ADRC to a one-county integrated Aging Unit/ADRC will be a campaign to educate the public. The primary guiding principal through this entire planning process has been, and will be, keeping what is best for our residents at the forefront.

PART III: PROJECT PROPOSAL

A. Administrative Framework

- 1. Service Area: Oneida County, Wisconsin
- 2. Governing Board: The ADRC Board will consist of nine (9) members. Four (4) members will be Oneida County supervisors, appointed by the Oneida County Board of Supervisors. Two (2) citizen members will be representatives of older adults, one (1) citizen member will be a representative of persons with physical disabilities, and one (1) citizen member will be a representative of persons with developmental disabilities. Efforts will be made to ensure that citizen members are members or family of the target groups. One (1) citizen member at-large will represent the general community. Board members terms will be staggered and rotated on a three-year basis, with a maximum of two full terms. As a fully integrated agency, the ADRC Board will meet all standards and duties of both and ADRC Board and County Aging Unit Commission on Aging.
- 3. Organizational Structure: As a fully integrated ADRC and county aging unit, the title of the department will change to ADRC of Oneida County. The department will have a full-time department director responsible for the combined operation and budgets of ADRC and aging services. The department will have a full-time assistant director who is directly responsible for all day-to-day ADRC related activities and ADRC staff in addition to supporting the department director with other aging activities/ services.

All standard internal support services will be provided by other Oneida County departments including human resources, building and grounds, information technology, financial management, legal counsel, etc. These support services will be provided "in-kind" as part of county governmental function. (Certain IT infrastructure like telephone access is pro-rated by telephone unit and charged to the ADRC.)

See Section G-5 for overview of the internal organizational structure

- 4. Director/Assistant Director: The integrated ADRC of Oneida County department director, Dianne Jacobson, is bachelor-degree prepared with 30+ years' experience working with ADRC client populations. She also currently serves as the president of the Aging and Disability Professionals Association of Wisconsin (ADPAW). Dianne was closely involved in the formation of the ADRC of the Northwoods and served as acting interim regional manager of that program for six-months during the permanent regional manager search process. The ADRC department director will be responsible for overall management of the fully integrated ADRC and county aging unit. The assistant director, Joel Gottsacker, will have direct responsibility for the day-to-day management of all ADRC core services and the employees who perform those duties. Joel is master-degree prepared in both Social Work and Business Administration, a Wisconsin Certified Independent Social Worker with 25+ years' experience working with ADRC client populations. Both the director and assistant director have attended numerous ADRConnect meetings, state conferences and DHS trainings and are both very familiar with the Scope of Services within the ADRC contract.
- 5. **Staffing:** The ADRC core services will be performed by three (3) FTE ADRC specialists and a one (1) FTE disability benefits specialist. The elder benefits specialist will be part of the ADRC core services team, also supervised by the assistant director but funded through the county aging unit. All specialists meet the educational requirements to fulfill ADRC duties. At least one ADRC specialist will be AIRS certified. The ADRC supervisor is master-degree prepared with 25+ years' experience in case management, long-term care, home and community based care, information and assistance and is a certified functional screener. No staff positions are anticipated to be shared with other entities.
- 6. Location and Physical Plant: The main ADRC office will be housed at 100 W. Keenan Street, Rhinelander, WI. This location is the site of the current ADRC of the Northwoods satellite office and the Oneida County Department on Aging which also operates the Oneida County Senior Center. ADRC staff have individual offices in

which to privately meet with customers. The site has multiple meeting rooms for small and large group activities. The building has broadband internet access supported by Oneida County. Hours of operation are 8:00 AM to 4:30 PM Monday through Friday. There is parking immediately adjacent to the building with sufficient parking reserved for persons with disabilities. The building is fully accessible and well signed. The physical plant is in excellent condition and maintained by Oneida County. The entry is open and welcoming with staff present to greet and direct all visitors. A second site is anticipated to be staffed in the Minocqua/Woodruff area to support the target populations there. Operational hours will be the same as the Rhinelander office.

- 7. Equipment and Systems: The ADRC intends to continue using SAMS-IR. The ADRC supervisor will act as client tracking lead and resource database lead. The ADRC telephone system will be part of the IT supported telephone system for the county and include a toll-free option. The ADRC website will be developed upon application approval.
- 8. Cultural Competence and Diversity: Oneida County has a predominately white population (96.6%) with other populations represented at less than 1% per census group. ADRC staff will be encouraged to attend diversity and cultural competency trainings as they are available. English is the primary language for residents of Oneida County, but Certified Languages International will be used for interpreter services for non-English speaker who contact the ADRC. The ADRC will ensure access to information and materials for customers with visual impairments or other communication barriers by providing the information in alternative formats.
- 9. Avoiding Conflicts of Interest: The ADRC will avoid conflicts of interest, and perceived conflicts of interest, through establishing policies and procedures that support firewalls for engagement with vendors, providers, sponsors and advertisers. The ADRC will communicate to all parties and customers that the ADRC does not endorse or recommend any entity that provides the ADRC with in-kind or material support for programs or services. When using Older American Act funds for

- programs or services, the ADRC will use the same policies and procedures to avoid conflicts. The board of directors will not have any members who have a prohibited relationship with an entity that can be construed to have a financial interest in any public programs for which the ADRC provides options or enrollment counseling and services.
- 10. Complaints and Appeals: The ADRC will adhere to the published Office for Resource Center Development (ORCD) Complaint and Appeal policy for ADRC activities. The ADRC will adhere to Medicaid/Long Term Care appeals process when a person seeks redress through that method of action. The ADRC recognizes that customers may seek to utilize both processes simultaneously.
- 11. Community Needs Identification: The ADRC will seek customers input through public hearings, mailings, and participation in local stakeholder organization advisory groups. The ADRC will expand triennial public hearings required under the Older Americans Act to include input from stakeholders with developmental disabilities, mental health needs, AODA needs, and physical disabilities.
- 12. Collaboration with Local Agencies and Stakeholders: The ADRC will establish memoranda of agreement or understanding (MOA/MOU) with local agencies and stakeholders. For example, the Oneida County Department of Social Services (DSS) and the ADRC will establish an MOU for Adult-at-Risk/Adult Protective Service referrals, and referrals for serving individuals with high need who are not currently, or soon-to-be, eligible for Family Care. This will ensure vulnerable adults will have access to services that will assist in maintaining quality of life and independence. The ADRC will meet regularly with Family Care MCOs and IRIS Consultant Agencies to review enrollment and disenrollment activities. The ADRC will regularly meet with the Central IM Consortium to discuss issues of Medicaid applications and renewals. The ADRC will continue to review opportunities to collaborate with other local agencies and stakeholders while remaining free of conflicts of interest.
- 13. Quality Assurance/Quality Improvement Process: The ADRC will implement a quality assurance plan that will minimally include regular one-to-one and bi-weekly

staff meetings for regular monitoring of customers' needs and concerns.

Supervisory staff will regularly review SAMS-IR cases to provide feedback to ADRC staff. The staff person identified to act as Long Term Care Functional Screen Liaison will track timeliness of screening activity and will regularly review completed screens for accuracy and completeness.

B. Provision of ADRC Services

- 1. Marketing, Outreach, and Public Education: The ADRC will publish a monthly newsletter to the public including topics pertinent to long-term care needs. The ADRC will participate in health fairs and programs as they become available. During periods of high need (e.g., annual Part D enrollment, evidence-based programs) the ADRC will seek public service announcements and coverage on local television and paper news. The ADRC will provide education to community partners such as discharge planners, nursing home and CBRF staff, government agencies, and private non-profits to promote referrals and maintain knowledge of ADRC activities. All activities and communications will clearly cite the ADRC's name and contact information.
- 2. Information and Assistance: As information and assistance is a primary activity of the ADRC, staff will be available to answer phones Monday through Friday, 8:00 AM 4:30 PM. Signage and phone messages will offer contact or appointments outside the posted office hours and at a location convenient for the client. In the event an ADRC specialist staff is not available, a message will be taken and the caller will receive a response within 24 working hours.
- 3. Long-Term Care Options Counseling: The ADRC will provide long-term care options counseling at a time, date and location convenient for the individual seeking counseling. Counseling will involve face-to-face, telephone, or digital consultation as needed and desired by the customers. Long-term care options counseling will provide unbiased information as to payment sources and settings and will encourage decision-making based upon customers being fully informed. Counseling will be provided to all citizens without regard to age or income.

- 4. Services to People with Dementia and Their Families: The ADRC will apply the Dementia Care Guiding Principles in provision of services to people with dementia and their families. The ADRC will partner with the Alzheimer's Association to provide services to persons with dementia and their families. The ADRC will work in conjunction with DSS to assure that funding for services for person's with financial needs are provided the opportunity to access services as funds permit (e.g., Alzheimer's Family Caregiver Support Program). The ADRC and Alzheimer's Association will host support groups and offer education to the community on Alzheimer's and related cognitive disorders.
- 5. Counseling to Caregivers: The ADRC will provide caregiving resources and counseling to caregivers as requested. This counseling will include information on respite services available to caregivers and access to caregiver programs (e.g., Alzheimer's Family Caregiver Support Program and National Family Caregiver Support Program).
- 6. Preadmission Consultation and Assistance with Resident Relocations: ADRCs shall provide preadmission consultation to persons who have been referred to the ADRC by a nursing home; community based residential facility, or residential care apartment complex. The ADRC shall provide preadmission consultation consistent with the person's individual needs and preferences. Preadmission consultation includes, but is not limited to: long-term care options counseling with topics discussed as follows:
 - The range of care settings and options available to meet the person's longterm care needs, including supports and services that could permit the person to remain at home;
 - ii. The cost and financial implications of the various options;
 - iii. Ways to evaluate facility quality and appropriateness; and
 - iv. Programs which may be available to help pay for the person's care, eligibility requirements and procedures, and limits on the use of public funding in certain settings.

Preadmission consultation shall not attempt to persuade the individual to choose particular provider, type of service, long-term care program or managed care organization.

The ADRC shall provide preadmission consultation at a time and location that are convenient for the individual and, when possible, prior to the person's admission to the facility.

The ADRC will assist individuals seeking to move to a community setting from a nursing home, assisted living, or other care setting. This assistance will include referrals generated from the MDS Q protocol and assistance to individuals needing to move due to facility closures or downsizing.

- 7. Elder Benefits Counseling: The ADRC of Oneida County will employ the Elder Benefit Specialist (EBS) in an office located near the ADRC specialists and DBS. The EBS will support adults 60 years and older with assistance in applying for, using, and understanding public and private benefits. The employee will meet all the requirements and standards of an EBS contained in Chapter 9 of the A Manual of Policies, Procedures and Technical Assistance for the Wisconsin Aging Network. The EBS will not perform any prohibited activities. Funding for the EBS is allocated through the Greater Wisconsin Agency on Aging Resources, Inc (GWAAR) to Oneida County in addition to federal Medicaid time-reporting match funds.
- 8. **Disability Benefits Counseling:** The Disability Benefit Specialist (DBS) will be employed by the ADRC of Oneida County with office located near the ADRC specialists and EBS. The DBS will continue to support adults aged eighteen (18) through fifty-nine (59) with assistance in applying for, using, and understanding benefits. The DBS will meet all the requirements contained in the *Disability Benefit Specialist Scope of Services* and *Disability Benefit Specialist Program Policies and Procedures* documents. The Disability Benefit Specialist will not perform any prohibited activities.
- 9. Access to Publicly Funded Long-term Care Programs: The ADRC will assist individuals seeking publicly funded long-term care through options counseling, provision of the Long Term Care Functional Screen, enrollment counseling for Family Care/IRIS, and the Medicaid application process. Assistance will be provided to those needing services immediately but who are not financially eligible for Medicaid-

- funded programs by assistance in securing funds through the Alzheimer's and National Family Caregiver programs, Elder Abuse funds, or County levy funds as appropriate and available.
- 10. Enrollment and Disenrollment Counseling: The ADRC will provide enrollment counseling to people who have been found to be eligible for and are considering enrolling in publicly funded programs. ADRC staff will comply with all DHS requirements for one-on-one consultation to review, discuss and provide the customer with objective/non-biased information on covered benefits, provider networks, responsibility for coordination of care, opportunities for self-direction and choice and all other features of Family Care and IRIS. Only DHS developed materials will be used to in the Enrollment Counseling process. ADRC staff will explain eligibility requirements, cost sharing requirements, and basic features of publicly funded managed care, fee-for-service Medicaid and self-directed supports programs available in Oneida County. Enrollees will be informed of all their rights, including their right to disenroll and the entire disenrollment process, appeal, ombudsman and all other resources. The enrollment and disenrollment procedures will comply with all DHS contract requirements for documentation, timelines and processes.
- 11. Access to Other Public Programs and Benefits: The ADRC will assist individuals seeking additional as requested. Such benefit programs may include, but are not limited to: Veteran's benefits, Forward Health medical coverage, Senior Care prescription coverage, Food Share, and Lifeline telephone assistance.
- 12. Short-term Service Coordination: The ADRC may provide short-term service coordination for up to 90 days for individuals who are deemed functionally eligible for Family Care but require some assistance to arrange for care and services until full-benefit Family Care or IRIS is secured. It is anticipated that short-term service coordination will be necessary for persons whose financial eligibility for Family Care/IRIS is more complex and require additional time to secure Medicaid under the programs. The ADRC will coordinate with DSS to provide case management services for persons in need of long term care, but who are not functionally or financially

- eligible within 90 days. Those persons in need of limited in-home services to avoid publicly-funded long term care will be assisted to access services through federal, state, or county-funded services as appropriate and available.
- 13. Access to Emergency Services: Oneida County participates in the 911 system for medical emergencies. The ADRC will coordinate with law enforcement and local medical providers to provide ADRC services for persons who are determined to need such assistance when the emergent situation has concluded. For individuals with urgent, but not emergency, needs, the ADRC will assist as requested.
- 14. Access to Elder/Adults-at-Risk and Adult Protective Services: The ADRC will enter into a Memorandum of Agreement with DSS for Adult-at-Risk/Adult Protective Services. DSS is the agency designated for these services. The ADRC and DSS will meet regularly to review needs in this population. The ADRC and DSS will develop protocols for use of available funding to address the needs of at-risk persons or persons in need of protection. ADRC staff will not act as guardian or Power of Attorney for any person, excluding those instances when appropriately acting in those roles as family members or other close relationship. ADRC staff will inform management of any such relationships and will not act in capacity of the ADRC when exercising duties as guardian or Power of Attorney.
- 15. Transitional Services for Students and Youth: The ADRC will serve youth with physical or developmental/intellectual disabilities (age 17 years 6 months or older) and their families/guardians by providing information, resources and options for transitioning into adult services. A variety of ongoing community outreach efforts will be conducted to ensure that youth and their families/guardians are aware of the ADRC services. One ADRC Specialist will be the primary contact for transition planning and services and will also take part in the local Transition Advisory Committee. ADRC efforts will be coordinated with all relevant partners (school districts, Division of Vocational Rehabilitation, Human Services Department, etc).
- 16. Health Promotion and Early Intervention Services: ADRC staff providing information and assistance and long-term care options counseling will routinely

include identifying customers' needs for health promotion, prevention and early intervention information. In addition, staff will provide materials, education or referrals as appropriate. The Department on Aging is currently the leading provider of evidence-based programs and older adult health promotion activities in Oneida County including the administration of the Older Americans Act Title III-D funding. In addition to Department on Aging staff, some ADRC staff have become certified leaders in the *Living Well* program and will co-lead workshops as work load allows.

17. Customer Rights, Client Advocates, and ADRC Advocacy: The ADRC will inform customers of their rights and responsibilities including referrals to various advocacy resources or ombudsman services as appropriate. Customers will receive assistance in understanding how to resolve service system disputes or violation of rights complaints. The ADRC will cooperate with any advocate selected by a program participant applying applicable confidentiality policies. The ADRC will advocate on behalf of their target populations when needed services are not being adequately provided within the service delivery system. The Wisconsin Aging Network and the county aging units have a strong history of appropriate activities to advocate for the citizens they serve. Lobbying is not allowed and are distinct from advocacy activities required by ADRCs.

C. Customer Service Process

A call to the ADRC will be answered by a receptionist trained to elicit the caller's concern for accurate transfer to professional ADRC staff. Callers will speak to no more than two ADRC staff unless an escalation to management is required. For callers who are unable to express the reason for the call that easily fits into a ready category (e.g., "disability benefits," or "information on nursing homes"), the ADRC will have staff assigned to take calls specifically to assist these callers. Callers who identify a need specific to Elder or Disability Benefits will be transferred to those staff as appropriate. Other callers will speak to ADRC specialists who will conduct a phone interview to determine the need and best manner to provide assistance (i.e., at the time of the call, a return call with specific information, or an in-person meeting). Lunch-times will be staggered to assure

that phones are answered throughout the day. Staff will be assigned to specific days/times on which phone coverage will be a mandatory service. During heavy call volume, voice mail will be utilized to accept messages. Voice mail messages will be returned within 24 hours of receipt.

D. Implementation Timeline:

Key Tasks / Milestone in ADRC Implementation	Target Date
Appoint ADRC governing board	03/01/2018
ADRC start date	03/01/2018
ADRC director start date	03/01/2018
ADRC telephone system in place	03/01/2018
ADRC web site in place	06/01/2018
I&A resource database in place	03/01/2018
Client tracking system in place	03/01/2018
Hire I&A / options counseling staff (if applicable)	NA
Train I&A / options counseling staff (if applicable)	NA
Provide EBS services at the ADRC	03/01/2018
Hire DBS (if applicable)	03/01/2018
Train DBS (if applicable)	04/30/2018
Develop ADRC quality assurance plan	05/31/2018
Complete enrollment / disenrollment plan	04/30/2018
Begin offering disability benefits counseling	03/01/2018

E. ADRC Annual Budget

- 1. Budget attached (page 15)
- 2. Budget Narrative: The budget was developed using our budget knowledge and experience operating the ADRC of the Northwoods- Rhinelander satellite office for over the past five (5) years. The DBS salary/fringe expense is the only new position to be added to our current staff. We worked with both Oneida County Personnel and Finance departments to properly estimate expenses for the DBS. The Personnel

Worksheet includes all positions within the entire fully integrated ADRC of Oneida County and outlines the functions including percentage of time for ADRC services and non-ADRC services.

PART IV. Attachments

- A. County Board Resolution authorizing the ADRC Application Pending approval
- B. Letters of Support from Cooperating Organizations Pending approval
- C. Organizational Charts
 - 1. Internal Organizational Chart
 - 2. External Organizational Chart
- D. Designation of Confidential and Proprietary Information-None

Division of Publich Health F-00052A (02/2017)

AGING AND DISABILITY RESOURCE CENTER (ADRC) ANNUAL BUDGET

Completion of this form is voluntary; however, the information requested is required as part of the ADRC application process.

	ADRC Grant Funding	*MA Match Funding	Dementia Care Specialist Grant (if applicable)	Nursing Home Relocation Grant (if applicable)	List Other Funding (if applicable)	Grand Total
ADRC Program Personnel:	125 172		-	(,		
Salary	136,170	90,780				226,950
Fringe	83,128	55,419	_			138,547
Subtotal	219,298	146,199	0	0	0	365,497
Direct Expenses:						
Travel	6,100	3,900				10,000
Training	1,830	1,170				3,000
Printing	610	390				1,000
Postage	610	390				1,000
Office Supplies	793	507				1,300
Telephone	3,660	2,340				6,000
Computer & Related	3,050	1,950				5,000
Rent/Lease (list on pg. 6)	10,980	7,020				18,000
Equipment	1,220	780				2,00
Equipment Maintenance	671	429				1,10
Certifications/Professional Dues	61	39				10
Translation Services	305	195				500
Outreach/Marketing	3,496	2,330				5,82
Other Direct Expenses (list on pg. 6)	931	596				1,52
						(
Subtotal	34,317	22,036	0	0	0	56,35
Indirect Expenses:						
Administration/AMSO						
Other (list on pg. 6)						
Subtotal	0	0	0	0	0	(
Subcontracts: (include for staff or activities)						
(include for stair or activities)						
Subtotal	0	0	0	0	0	1
TOTAL EXPENSES:	253,615	168,235	0	0	0	421,85
Other Funding 1: Other Funding 2:						

NOTE: Subcontract section should equal amount on Subcontract Worksheet. Insert additional lines as needed.

^{*} For assistance with estimating and utilizing MA Match Funding, please contact ORCD financial manager.

Page

Personnel Worksheet 2018

Please include all ADRC staff. Please report subcontracted staff in the designated section.

ADRC service the employee performs. A function is considered an ADRC function if it is included in the ADRC Scope of Services of Under the "All Functions" column include: I&A, Options Counseling, Enrollment Counseling, LTCFS, DBS, outreach, and any other the contract. Include non-ADRC activities such as APS if applicable. Please include only one staff member per line. See the example below.

s Split	By Work Effort		
医 Method for allocation of Split Funded Positions	By FTE		×
区 Method : Fun	100% Time Reporting	×	×
% FTE Funded by Other Source (list source)		100% Older Americans Act (OAA) & County Levy	30% OAA & County Levy
% FTE Funded by ADRC funding (all funds see note, page 5)		%0	70%
Annual Salary (not fringe)		70,241	53,480
Total FTE for this Person		1.00	1.00
All Functions (ADRC and other) performed by this individual (see example below; include % of time for ADRC and non-ADRC)		Directs the operations of the fully integrated ADRC department 100%	Supervises and monitors ADRC activities 70% OAA Programs 30%
EWaiver of Education and experience approved by ORCD			
Meets educatio n and experie nce require ments		×	×
E If AIRS Certifi ed			
Employee Name (full first and last name)	Directors/Supervisors Section	Dianne Jacobson	Joel Gottsacker
Position Title (please indicate if LTE)	Directors/Supe	ADRC Director	ADRC Assistant Director

ra ankoski	Other Staff Section									100%		By
Laura Laura Laura Laura Laura Laura Laura	,									I ime Reporting	By FIE	Work Effort
Jennifer		aura wenkoski			I&A, options counseling, enrollment counseling, LTCFS	1.00	45,260	100%	%0	×	×	
Traci Caswell	ist	nnifer ackett			I&A, options counseling, enrollment counseling, LTCFS	1.00	45,175	100%	%0	×	×	
Kristine	ist	aci Caswell			I&A, options counseling, enrollment counseling, LTCFS	1.00	44,173	100%	%0	×	×	
To be hired		ristine thiek			SHIP Counseling, benefits assistance	1.00	43,037	%0	100% OAA & County Levy	×	×	
Dawn □ ⊠ □ Answers 1.00 Johnson customers, greets customers, clerical support clerical support .6 Maria Cox □ ⊠ □ Services, reporting, clerical support .6 Stephanie □ ⊠ □ Senior center 1.0 Schroeder □ ⊠ □ Senior center 1.0		be hired		×	Benefits counseling & assistance	1.00	44,173	100%	%0	×	×	
Maria Cox □ 区counting .6 services, reporting, clerical support Stephanie □ Senior center 1.0 Schroeder □ Frogram develonment		awn hnson		×	Answers phones, greets customers, clerical support	1.00	33,170		80% OAA & County Levy		×	
Schroeder Schroeder I.0		aria Cox	0		Accounting services, reporting, clerical support	9.	29,187	10%	50% County Levy		×	
		ephanie hroeder			Senior center program development, volunteer coordinating	1.0	36,874	%0	100% OAA, County Levy, & Program income			

		T	1	_	T	 <u> </u>	_				1
	 					By Work Effort					
×						By FTE				,	
						100% Time Reporting					
%09	OAA	100% Program Income, OAA	100% County Levy								
%0		%0	%0								
20,932		45,000	10,500								
9.		LTE	LTE								10.2
\vdash	escort rides, HDM roster & billing	Manages dining site	Answers phones & greets customers								Total FTE:
S	<u> </u>										L
×		×	×				:				
Mary Boyer		(6) LTE Staff	Jolene Schirmacher			ection		:			
Nutrition &		Dining Site Managers	Receptionist			Contract Staff Section					

% FTE funded by ADRC funding should include contract funding and federal funding combined (you do not need to separate these funds on this form).

percent that is ADRC funded and the percent funded by other sources. The other source(s) must be listed as well as the method for NOTE: If positions are split (either duties or funding), show the full FTE of the position and the total annual salary. Then note the allocating funds.

Internal Organizational Chart



